I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY GARCIA

Electronic Signature of Signing Officer/Director Detail

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000025044

Entity Name: THE STREET PLANS COLLABORATIVE, INC.

Current Principal Place of Business:

221 ARAGON AVENUE SUITE 204 CORAL GABLES, FL 33134

Current Mailing Address:

221 ARAGON AVENUE SUITE 204 CORAL GABLES, FL 33134 US

FEI Number: 27-2163948

Name and Address of Current Registered Agent:

GARCIA, ANTHONY T 221 ARAGON AVENUE SUITE 204 CORAL GABLE, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	Р	Title	VP
Name	GARCIA, ANTHONY T	Name	LYDON, MICHAEL P
Address	221 ARAGON AVENUE SUITE 204	Address	155 WATER STREET, FLOOR 2
		City-State-Zip:	BROOKLYN NY 11201
City-State-Zip:	CORAL GABLES FL 33134		

istered office or registered agent, or both, in the State of Florida.

01/09/2017

Date

FILED Jan 09, 2017 Secretary of State CC7212177478

Certificate of Status Desired: Yes

PRESIDENT